



U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

INSTALLATION'S EPA I.D. NO.	NYD059385120
I. NAME OF IN- STALLATION	GENERAL ELECTRIC CO* FD BOX [REDACTED] 4840 NY [REDACTED]
II. INSTALLATION MAILING ADDRESS	[REDACTED]
III. LOCATION OF INSTAL- LATION	ELECTRONICS PARKWAY LIVERPOOL, NY [REDACTED] 13088

FOR OFFICIAL USE ONLY

[illegible]

I. NAME OF INSTALLATION

[illegible]

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX																				
C	3	P	O	B	O	X	4	8	4	0										
15	16															45				
CITY OR TOWN															ST.		ZIP CODE			
C	4	S	Y	R	A	C	U	S	E											
15	16															40	41	42	47	51

III. LOCATION OF INSTALLATION

		STREET OR ROUTE NUMBER																								
c																										
5																										
15	16																					45				
		CITY OR TOWN																		ST.	ZIP CODE					
c																										
6																										
15	16																				40	41	42	47	-	51

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)															PHONE NO. (area code & no.)																		
2	Q	U	I	M	B	Y	R	O	M	G	R	P	E	&	C							3	1	5	-	4	5	6	-	2	1	5	1
15	16																				43	46	-	48	49	-	51	52	-	55			

V. OWNERSHIP

		A. NAME OF INSTALLATION'S LEGAL OWNER																							
C																									
8		G	E	N	E	R	A	L		E	L	E	C	T	R	I	C		C	O	M	P	A	N	Y
15	16																								

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F = FEDERAL
M = NON-FEDERAL

☒ 57 A. GENERATION ☒ 58 B. TRANSPORTATION (complete item VII)

☒ 59 C. TREAT/STORE/DISPOSE ☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ 61 A. AIR ☐ 62 B. RAIL ☒ 63 C. HIGHWAY ☐ 64 D. WATER ☐ 65 E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

[illegible]

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

S	W	N	4	0	0	5	9	3	8	5	1	2	6	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 1 23 - 26	2 F 0 0 2 23 - 26	3 F 0 0 3 23 - 26	4 F 0 0 4 23 - 26	5 F 0 0 5 23 - 26	6 F 0 0 6 23 - 26
7 F 0 0 7 23 - 26	8 F 0 0 8 23 - 26	9 F 0 0 9 23 - 26	10 F 0 1 0 23 - 26	11 F 0 1 7 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 23 - 26	14 23 - 26	15 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. Page 1 of 3

31 P 0 0 5 23 - 26	32 P 0 1 1 23 - 26	33 P 0 1 8 23 - 26	34 P 0 2 2 23 - 26	35 P 0 2 9 23 - 26	36 P 0 3 0 23 - 26
37 P 0 5 3 23 - 26	38 P 0 7 6 23 - 26	39 P 0 7 8 23 - 26	40 P 0 9 8 23 - 26	41 P 1 0 4 23 - 26	42 P 1 0 6 23 - 26
43 P 1 2 1 23 - 26	44 U 0 0 1 23 - 26	45 U 0 0 2 23 - 26	46 U 0 0 3 23 - 26	47 U 0 0 6 23 - 26	48 U 0 1 2 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
-------------------	-------------------	-------------------	-------------------	-------------------	-------------------

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) Dayton E. Hardwick, Manager Electronic Syst. Rel. & Util. Oper.	DATE SIGNED 8/12/80
---	---	------------------------

IX - Description of Hazardous Wastes

C - Commercial Chemical Product Hazardous Wastes - Pg 3 of 3

94	95	96	97	98
U226	U227	U228	U229	U238
99				
U239				

*Coded
off*

IX — Description of Hazardous WastesC — Commercial Chemical Product Hazardous Wastes (cont'd) Pg 2 of 3

49	50	51	52	53
U013	U017	U019	U025	U031
54	55	56	57	58
U032	U037	U044	U052	U076
59	60	61	62	63
U077	U107	U108	U112	U113
64	65	66	67	68
U114	U117	U121	U122	U123
69	70	71	72	73
U133	U134	U140	U144	U145
74	75	76	77	78
U147	U151	U154	U159	U161
79	80	81	82	83
U162	U165	U167	U168	U169
84	85	86	87	88
U188	U190	U196	U197	U208
89	90	91	92	93
U210	U213	U219	U220	U222

RCRA INSPECTION REVIEW SHEET

File

Name of Facility - General Electric Electronics Park, Syracuse, NY

RCRA ID# - NY0059385120

Date of Inspection - 6-24-81

Type of Inspection: Generator

Transporter

TSD

Name of EPA/State Inspector -

Charles Branagh, NYSDEC

418

Findings of Inspection:

manifest does not indicate alternate facility

Action(s) Taken: *none*

Action(s) Recommended: *none*

PERMITS AND COMPLIANCE SECTION
AUG 7 4 06 PM '81
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

AUG 21 1984

Mr. Mehran Bayramzadeh
Assistant Engineer
Permits Section
Division of Solid and Hazardous Waste
New York State Department of
Environmental Conservation
50 Wolf Road
Albany, New York 12233-0001

Dear Mr. Bayramzadeh:

We received the revised closure/post closure plan for the storage facility at General Electric Company's Electronics Park, Syracuse, New York, EPA I.D. Number NYD059385120.

This closure plan appears to have all the necessary documents to meet the requirements of an acceptable closure plan (40 CFR §265.112 and §265.142).

I am requesting that the State review the enclosed closure plan and provide written comments to me by September 5, 1984.

If there are any questions concerning this matter, please feel free to contact me at 212/264-1913.

Sincerely yours,

William C. Smith
Permit Section
Solid Waste Branch

Enclosure

bcc: R. Testa, PAB

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 4013	2 4017	3 4019	4 4025	5 4031	6 4032
7 4037	8 4044	9 4052	10 4076	11 4077	12 4107

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 4108	14 4112	15 4113	16 4114	17 4117	18 4121
19 4122	20 4123	21 4133	22 4134	23 4140	24 4144
25 4145	26 4147	27 4151	28 4154	29 4159	30 4161

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 4162	32 4165	33 4167	34 4168	35 4169	36 4188
37 4190	38 4196	39 4197	40 4208	41 4210	42 4213
43 4219	44 4220	45 4222	46 4226	47 4227	48 4228

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 4229	50 4238	51 4239	52	53	54
------------	------------	------------	----	----	----

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE (type or print)	DATE SIGNED
-----------	---------------------------------------	-------------

I.D. - FOR OFFICIAL USE ONLY

W	4	0	5	9	3	8	5	1	2	0	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 4013	2 4017	3 4019	4 4025	5 4031	6 4032
7 4037	8 4044	9 4052	10 4076	11 4077	12 4107

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 4108	14 4112	15 4113	16 4114	17 4117	18 4121
19 4122	20 4123	21 4133	22 4134	23 4140	24 4144
25 4145	26 4147	27 4151	28 4154	29 4159	30 4161

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 4162	32 4165	33 4167	34 4168	35 4169	36 4188
37 4190	38 4196	39 4197	40 4208	41 4210	42 4213
43 4219	44 4220	45 4222	46 4226	47 4227	48 4228

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 4229	50 4238	51 4239	52	53	54
------------	------------	------------	----	----	----

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

G.F. Electronics Parks

General Comment:

Accepting waste from offsite }

No Closure Certification: approve if not

N/A. Richard \$/31 11:43 pm

G.F. is not the transporter from their facility to the vendor, but they do pick up the waste from their other facilities with the manifest address to the vendor and use the Electronics Park facility as a transfer point.



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

•NYD059385120

INSTALLATION ADDRESS

GENERAL ELECTRIC CO
PO BOX 4840
SYRACUSE

NY 13221

ELECTRONICS PARKWAY
LIVERPOOL

NY 13088

DE80 11/7/80

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

041493 (B)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

N Y D 0 5 9 3 8 5 1 2 0

II. Name of Installation (Include company and specific site name)

M A R T I N M A R I E T T A E L E C T R O N I C S P K

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

E L E C T R O N I C S P A R K W A Y

Street (continued)

City or Town

State

ZIP Code

L I V E R P O O L N Y 1 3 0 8 8 -

County Code

County Name

O N O N D A G A

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

B L D G 2 R O O M 1 4 7 E L E C T R O N I C S P K

City or Town

State

ZIP Code

S Y R A C U S E N Y 1 3 2 2 1 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

(first)

M E A S H E Y K E N N E T H

Job Title

Phone Number (area code and number)

M A N A G E R E H S 3 1 5 - 4 5 6 - 3 7 2 4

VI. Installation Contact Address (See Instructions)

A. Contact Address
Location Mailing

B. Street or P.O. Box

☐
☒

City or Town

State

ZIP Code

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

M A R T I N M A R I E T T A C O R P O R A T I O N

Street, P.O. Box, or Route Number

7 9 2 1 S O U T H P A R K P L A Z A S U I T E 2 1 0

City or Town

State

ZIP Code

L I T T L E T O N C O 8 0 1 2 0 -

Phone Number (area code and number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed)
Month Day Year

3 0 3 - 9 7 1 - 1 8 7 0 P P Yes X No 0 4 0 2 9 3

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

1. Generator (See instructions)
☒ a. Greater than 1000 kg/mo (2,200 lbs.)
☐ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes
- Mode of Transportation
☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify _____
3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace
- Indicate Type of Combustion Device(s)
☐ 1. Smelter/Referral
☐ 2. Small Quantity Exemption
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner - indicate device(s) - Type of Combustion Device
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☐ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (D000) ☐
- (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (type or print)

Steven Walker, Operations Manager

Date Signed

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

April 5, 1993

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

U.S. Environmental Protection
Agency
Region II
Permits Administration Branch
26 Federal Plaza, Room 505
New York, New York 10278

Re: Change of Ownership - General Electric Company
Aerospace to Martin Marietta Corporation

Dear Sir or Madam:

This is to advise that on April 2, 1993, General Electric Company transferred its Aerospace business to Martin Marietta Corporation. We enclose a completed and signed EPA Form 8700-12, "Notification of Regulated Waste Activity," indicating this change of ownership for each of the following facilities located in New York State:

1. Electronics Park in Salina;
2. Farrell Road Plant in Geddes;
3. Court Street Plant (Buildings 4, 5 and 5A) in Syracuse;
4. Court Street Plant (Building 8) in Syracuse;
5. Antenna Park in Manlius;
6. Research Vessel (R.V.) Paganelli on Cayuga Lake in Lansing;
7. Air Force Plant No. 59 in Johnson City;
8. Regional Electronics Center in Conklin;
9. French Road Plant in Utica;
10. Broad Street Plant in Utica; and
11. Malta Plant in Malta.

U.S. Environmental Protection
Agency
April 5, 1993
Page 2

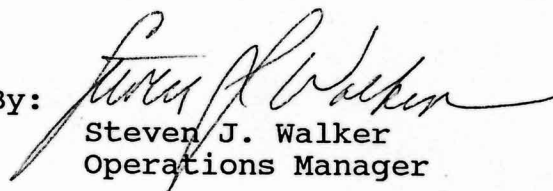
Please update your file to indicate Martin Marietta Corporation's ownership of these facilities.

If you have any questions, please contact Jayne Saydah at (315) 456-7448 of my staff.

Very truly yours,

MARTIN MARIETTA CORPORATION

By:



Steven J. Walker
Operations Manager

Enclosures

cc: New York State Department of
Environmental Conservation (w/copies of enclosures)

PE 93 4/19/93



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/19/93

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NYD059385120

FACILITY NAME -> MARTIN MARIETTA ELECTRONICS PARK

MAILING ADDRESS -> BLDG 2 ROOM 147 ELECTRONICS PK
SYRACUSE, NY 13221

INSTALLATION ADDRESS -> ELECTRONICS PKWY
LIVERPOOL, NY 13088

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: MEASHEY, KENNETH
MGR EH & S
MARTIN MARIETTA ELECTRONICS PARK
BLDG 2 ROOM 147 ELECTRONICS PK
SYRACUSE, NY 13221